

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEES DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | 69300 | 10/13/00 |

INDEX OF CLAIMS

| | | | |
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| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| — (Through numeral) | Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |

| Claim | Date |
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| Final | 03/02 |
| Original | 03/21 |
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| Claim | Date |
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| Final | 03/21 |
| Original | 03/21 |
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If more than 150 claims or 10 actions
staple additional sheet here

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